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AO 240 (Rev. 107/13) DELAW ARE (Rev. 47/15)

UNITED STATES DISTRICT COURT DISTRICT OF DELAWARE

		DISTRICT OF D	LLAHARE	
	/	Tidpodo cui		
		Plaintie	APPLICATION T	OPROCEED
		/ Idiana	WITHOUT PREP	
	110	Nicole M. Wolker		
	/ <i>K</i> K.	Defendants)	FEES AND AI	SFIDAVII
		Defendant(s)	CASE NUMBER:	
	/		Checholider.	06-22
I,	10/3	Ronle Quinni	declare that I am the (che	ck appropriate box)
• •	Petitio	oner Maintiff Movant • Other		
	1 011111	oner oner		
in the a	above-e	entitled proceeding; that in support of my request	to proceed without prepaym	ent of fees or costs under
		5, I declare that I am unable to pay the costs of	f these proceedings and that	I am emitted to the felief
sought	in the	complaint/petition/motion.	1	3
		•	1	1 2006
In supr	ort of t	this application. I answer the following question	s under penalty of periury	APR - 4 2000
a. oup				COURT
1.	Are yo	ou currently incarcerated?	No (If "No" go to Que	DISTRICT OF DELAWARE
	If "YF	ES" state the place of your incarceration TV 12		
		ES" state the place of your incarceration Transfer		JACK CALVAN
	Inma	te Identification Number (Required):375	731	
	Are yo	ou employed at the institution? $N_{\overline{\partial}}$ Do you re	ceive any payment from the	institution? 1/1)
		h a ledger sheet from the institution of your inca actions	rceration showing at least th	ie past six months
2				
2.	Are yo	ou currently employed? Yes	9	
	a.	If the answer is "YES" state the amount of you	ır take-home salarv or waves	and nay period a
		and give the name and address of your employed		and pay period a
	b.	If the answer is "NO" state the date of your las		
		salary or wages and pay period and the name a	and address of your last empl	oyer.
3.	In the	past 12 twelve months have you received any ma	oney from any of the followi	ng sources?
			·	
	a.	Business, profession or other self-employment		1. NO
	b.	Rent payments, interest or dividends	• • Yes	No No
	c.	Pensions, annuities or life insurance payments		l·· No
	d.	Disability or workers compensation payments Gifts or inheritances	• • Yes • • Yes	NO
	e. f.	Any other sources	• • Yes	INO
	L.	Any other sources	- 1 GS	110
	If the	anguar to any of the above is "VES" describe and	sh source of money and accept	Y

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

AO	240	Reve	rse (R	44	10/0	3
DEL	NV	ARE	Rev	4/	(15)	

4. Do you	have any cash	or checking	or savings	accounts'
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No

If "Yes" state the total amount \$____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

If "Yes" describe the property and state its value.

List the persons who are dependent on you for support, state your relationship to each person and 6. indicate how much you contribute to their support, OR state NONE if applicable.

I declare under penalty of perjury that the above information is true and correct.

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER SUPPORT SERVICES OFFICE MEMORANDUM

06-221

TO:	Typone Surn SBI#: 375	731
FROM:	Stacy Shane, Support Services Secretary	parais and the same of the sam
RE:	6 Months Account Statement	FILED
DATE:	March 23, Device	APR - 4 2006
		U.S. DISTRICT COURT DISTRICT OF DELAWARE
		BO Scanned
	are copies of your inmate account statement for the	

The following indicates the average daily balances.

<u>MONTH</u>	AVERAGE DAILY BALANCE
ale at	43.75
act	U541
Na	59.54
Dec	59.01
gan	38.39
(Qb)	50.63
Average daily balances/6	52.74

Attachments

CC: File

Man The supplies

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Date Printed: 3/22/2006

For Month of September 2005

00375731 Guinn	Cast Maine	=	ritsi Name	VIII Suilly	Deg Mun Dalance.		\$25.53		
		Tyi	Tyrone						
Current Location: SU/1	1//1		Comments:	ints: QOL1					
	Dep With	Deposit or Withdrawal		Non-Medical			MO# or		
Trans Type D	Date An	Amount	Medical Hold	niou	Balance	Trans#	Ck#	PayTo	SourceName
Supplies-MailP 9/12/	9/12/2005	\$0.00	\$0.00	(\$0.37)	\$35.53	156124		POSTAGE	
Mail 9/21/	9/21/2005	\$25.00	\$0.00	\$0.00	\$60.53	160214	45184581		J GUINN
Supplies-MailP 9/23/	9/23/2005	\$0.00	\$0.00	(\$0.37)	\$60.53	161458		POSTAGE	
Canteen 9/27/	9/27/2005	(\$0.83)	\$0.00	\$0.00	\$59.70	162157			
Supplies-MailP 9/29/	9/29/2005	\$0.00	\$0.00	(\$0.37)	\$59.70	163969		POSTAGE	
			End	Ending Mth Balance:	\$59.70				

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: (\$1.17)

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Date Printed: 3/22/2006

For Month of October 2005

	The state of the s	The state of the s		-			
SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	\$59.70	
00375731	Guinn	Tyrone					
Current Location	1: SU/1	Comment	s: 0C	QOL1			

]
	SourceName						J. GUINN						
	PayTo	DST/POSTAGE	POSTAGE	POSTAGE	POSTAGE	DST/POSTAGE			DST/POSTAGE		POSTAGE		
MO# or	Ck#						9248001537						
	Trans#	167713	167855	168302	168498	168641	169206	169638	172396	175096	176099		
	Balance	\$59.70	\$59.33	\$58.96	\$58.59	\$57.07	\$82.07	\$72.07	\$72.07	\$62.11	\$62.11	\$62.11	
Non-Medical	51611	(\$1.52)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$0.37)	\$0.00	(\$0.37)	Ending Mth Balance:	
2	Medical Hold	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Endi	
Deposit or Withdrawal	Amount	\$0.00	(\$0.37)	(\$0.37)	(\$0.37)	(\$1.52)	\$25.00	(\$10.00)	\$0.00	(\$9.96)	\$0.00		
	Date	10/6/2005	10/6/2005	10/6/2005	10/6/2005	10/6/2005	10/11/2005	10/11/2005	10/14/2005	10/25/2005	10/26/2005		
	Trans Type	Supplies-MailP	Supplies-MailP	Supplies-MailP	Supplies-MailP	Supplies-MailP	Visit	Canteen	Supplies-MailP	Canteen	Supplies-MailP		

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: (\$1.17)

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Date Printed: 3/22/2006

For Month of November 2005

SBI	Last Name	T	First Name	MI Suffix	Beg Mth Balance:	nce:	\$62.11		
00375731	Guinn	T	Tyrone						
Current Location: SU/1	1: SU/1		Сошпе	Comments: QOL1					
		Deposit or Withdrawal		Non-Medical			MO# or		
Trans Type	Date	Amount	Medical Hold	Diola	Balance	Trans#	Ck#	PayTo	SourceName
Supplies-MailP	11/11/2005	(\$0.37)		\$0.00	\$61.74	183278		POSTAGE	
Supplies-MailP	11/11/2005	(\$0.37)	\$0.00	\$0.00	\$61.37	183619		DST/POSTAGE	
Supplies-MailP	11/18/2005	\$0.00	\$0.00	(\$0.60)	\$61.37	186444			
Canteen	11/22/2005	(\$15.27)	\$0.00	\$0.00	\$46.10	187136			
Visit	11/28/2005	\$25.00	\$0.00	\$0.00	\$71.10	188394	188394 0450239328-12300	0.	J. GUINN
			End	Ending Mth Balance:	\$71.10				

Total Amount Currently on Non-Medical Hold: (\$1.17) Total Amount Currently on Medical Hold: \$0.00

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		ĬŢ,	or Mo	For Month of December 2005	er 2005	
Last Name	First Name	MI	MI Suffix	Beg Mth Balance:	\$71.10	
Guinn	Tyrone					
21.12	(

00375731	Guinn	T	Tyrone		D				
Current Location: SU/1	n: SU/1		Сотте	Comments: QOL1					
		Deposit or Withdrawal		Non-Medical			MO # or		
Trans Type	Date	Amount	Medical Hold		Balance	Trans#	Ck#	PayTo	SourceName
Canteen	12/6/2005	(\$13.40)	\$0.00	\$0.00	\$57.70	191536			
Canteen	12/27/2005	(\$4.93)	\$0.00	\$0.00	\$52.77	199667			
Supplies-MailP 12/29/2005	12/29/2005	(\$0.60)	\$0.00	\$0.00	\$52.17	201837			
			Endi	Ending Mth Balance:	\$52.17				

Total Amount Currently on Non-Medical Hold: (\$1.17) Total Amount Currently on Medical Hold: \$0.00

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For Month of January 2006

PayTo SourceName 12/28/05 12/28/05 12/28/05 12/28/05 12/19/06 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/06 11/3/06 11/3/06	
MO # or Ck # 12/28/05 12/28/05 12/28/05 12/28/05 12/28/05 12/28/05 12/19/06 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/05 11/19/06 11/3/06 11/3/06	
Ck# PayTo 12/28/05 12/28/05 12/28/05 12/19/06 11/22/05 11/19/05 11/19/05 11/19/05 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06 11/19/06	
12/28/05 12/28/05 12/28/05 12/28/05 12/19/06 11/12/05 11/19/05 11/19/05 12/30/05 1/13/06 1/3/06	Trans#
12/28/05 12/28/05 12/28/05 12/19/06 11/12/05 11/19/05 0450245124 12/30/05 1/13/06 1/3/06	205184
12/28/05 12/28/05 12/19/06 11/22/05 11/19/05 11/19/05 0450245124 12/30/05 1/14/06 1/3/06	205185
12/28/05 12/28/05 12/19/06 11/22/05 11/19/05 11/19/05 12/30/05 1/14/06 1/3/06	206196
12/28/05 12/19/06 11/22/05 11/19/05 11/19/05 12/30/05 1/14/06 1/3/06	208737
12/19/06 11/22/05 11/19/05 11/19/05 12/30/05 1/14/06 1/3/06	208736
11/22/05 11/19/05 11/19/05 0450245124 12/30/05 1/14/06 1/3/06	210564
11/19/05 11/19/05 0450245124 12/30/05 1/14/06 1/3/06	211680
11/19/05 0450245124 12/30/05 1/14/06 1/3/06	211712
0450245124 12/30/05 1/14/06 1/13/06 1/3/06	211713
	212199
	212560
	213381
	213382
	213383
	214160

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: (\$1.17)

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				ıme																														
				SourceName																								GRANDMA						
)				PayTo	•	12/19/06	12/30/05	1/14/06	1/13/06	11/22/05	11/19/05	11/19/05	1/3/06		1/22/06	1/22/06		1/3/06	11/23/05	11/25/05	11/25/05	12/4/05	12/8/05	12/11/05	12/10/05	12/10/05	2/2/06		12/6/05	2/3/06	1/2/06	1/26/05	2/8/06	2/10/06
For Montl	\$42.18			MO#or Ck#																								5496556722						
	nce:		AV	Trans#	216212	217538	217766	217767	217768	217920	217942	217943	218081	218134	218472	218600	219326	220456	220519	220640	220657	220751	221562	221609	221616	221627	223494	223506	223912	223941	224039	224090	224662	224664
	Beg Mth Balance:			Balance	\$42.18	\$41.81	\$41.42	\$41.03	\$40.64	\$40.04	\$39.67	\$39.30	\$38.91	\$35.91	\$35.91	\$31.91	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$27.25	\$102.25	\$102.25	\$102.25	\$102.25	\$102.25	\$102.25	\$102.25
	MI Suffix	ts: QOL1	Non-Medical	Hold	(\$3.00)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$0.37)	(\$0.60)	(\$0.37)	(\$0.37)	(\$0.37)	(\$1.98)	(\$0.37)	(\$0.37)	(\$0.37)	(\$0.39)	\$0.00	(\$0.37)	(\$0.63)	(\$4.05)	(\$0.39)	(\$0.63)	(\$0.39)
	Vame	Comments:	Z.	Medical Hold	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$4.00)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	First Name Tyrone		Deposit or	Amount Mo	\$0.00	(\$0.37)	(\$0.39)	(\$0.39)	(\$0.39)	(\$0.60)	(\$0.37)	(\$0.37)	(\$0.39)	(\$3.00)	\$0.00	(\$4.00)	(\$4.66)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$75.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Last Name Guinn	SU/1		Date	2/1/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/2/2006	2/3/2006	2/3/2006	2/7/2006	2/8/2006	2/8/2006	2/8/2006	2/8/2006	2/9/2006	2/9/2006	2/10/2006	2/10/2006	2/10/2006	2/15/2006	2/15/2006	2/15/2006	2/15/2006	2/16/2006	2/16/2006	2/16/2006	2/16/2006
	SBI 1	Current Location:		Trans Type	Legai	Supplies-MailP	Legal	Medical	Medical	Canteen	Supplies-MailP	Mail	Supplies-MailP	Supplies-MailP	Supplies-MailP	Supplies-MailP	Supplies-MailP	Supplies-MailP																

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	2/10/06	2/6/06		2/18/06	2/19/06		
For Month of February 2006	224675	224676	225511	226012	226017		
th of Feb	\$102.25	\$102.25	\$45.46	\$45.46	\$45.46	\$45.46	
For Mon	(\$0.39)	(\$0.39)	\$0.00	(\$0.39)	(\$0.39)	Ending Mth Balance:	
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Endin	
	\$0.00	\$0.00	(\$26.79)	\$0.00	\$0.00		
	2/16/2006			2/22/2006	2/22/2006		
	Supplies-MailP	Supplies-MailP	Canteen	Supplies-MailP	Supplies-MailP		

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: (\$1.17)